

ISSUE SLD STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.J.P.E. CLASSIFIER		8	02-23/01
FORMALITY REVIEW	JP	1027	05/01/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ _____ Rejected
 ✓ _____ Allowed
 - (Through exam) _____ Cancelled
 + _____ Restricted
 H _____ Non-elected
 I _____ Interference
 A _____ Appeal
 O _____ Objected

Claim	Date	Claim	Date	Claim	Date
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If more than 150 claims or 10 actions
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